Secondary Individual Education Plan (Delaware)

Last Modified on 12/13/2024 9:46 am CST

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Tool Search: Special Ed Documents

The Secondary Individual Education Plan captures secondary student special education information and matches the required documentation provided by the state of Delaware. This document describes each editor, each field on the editor, and any special considerations and instructions.

> The current print format is **DE Secondary IEP 2024.1**. Delaware is a State Edition. Districts cannot change the plan format.

Editor Home

Editor Home

The Editor Home lists the editors available, their status, and Modification and Completion information.

Header	Description
Name	The name of the editor.
Status	The state of the editor. Statuses can be: • **In Progress** indicates a user has entered and saved data in that editor. • **Not Started** is the default status for all editors. • **Complete** indicates a user has clicked the Complete button on the editor, and the editor is read-only. This does not lock the editor from further editing but indicates the user considers the editor finished. • **Not Needed** indicates a user has clicked the **Not Needed** button on the editor. This is usually done for editors that do not apply to the student. The following statuses are only available for certain state-specific documents: • **ESign** indicates that the editor has functionality related to the eSignature process. See the Delaware Special Ed Plan eSignature Process article for additional information. • **Complete Pending eSignature** indicates the plan has been entered and sent via the Campus Parent portal to the student's guardian for eSignature.
Modified By	The date and the user by whom the editor was last edited.
Completed By	The date and the user who clicked the **Complete** button for that editor.

General Information

The following table lists the actions available for the editors. When resizing the window, certain buttons are condensed into a single **Action** button.

Button	Description

Button	Description
Save	Different editors have different save options. Click the arrow next to the Save & Stay button to view all saving options for any given editor. • **Save** captures progress and navigates the user to the Editor Home or to the List Screen for List editors. See the Editor Types section for additional information. • **Save & Stay** captures progress and keeps the user on the current editor. This save button is the default save option and is usually found within the detail screen or list editors, such as Goals and Objectives. • **Save & Next** captures progress and navigates the user to the next editor. • **Save & New** captures progress and creates a new record. This save button is usually found within the detail screen of a list editor, such as Goals and Objectives. See the Editor Type section for additional information.
Refresh	Retrieves a new copy of data from the student's record. This includes enrollment, student, parent/guardian, and team member information. This also returns any accidentally deleted records. Manually entered fields do not change when the refresh button is clicked. The user must **Save** after clicking Refresh to capture changes. A side panel displays a listing of all the student's applicable enrollment records. See the Enrollments tool documentation for additional information.
Cancel	Navigates the user to the Editor Home screen or the List Screen for List editors.
Status	Changes the status of the editor. • **Complete** indicates the editor is finished. This makes the editor read-only. However, this does not lock the editor from further editing. The user must click **In Progress** to further edit after an editor is marked Complete**.** • **Not Needed** indicates the editor does not apply to the student's plan or evaluation. This makes the editor read-only. However, this does not lock the editor from further editing. Click the **In Progress** button to further edit after an editor is marked Not Needed. • **In Progress** only displays when the editor is in the Complete or Not Needed status and allows additional edits to be made. The following status is only available for the Nevada and Delaware: • **Complete Pending eSignature** only displays for the Procedural Safeguards, IEP Implementation, and Medicaid Consent editors. This button marks the editor as complete until the parent/guardian electronically signs those sections of the plan via the Campus Parent Portal. See the Delaware Special Ed Plan eSignature Process article for additional information.
Print	Prints the entire document.
Editors	Opens a side panel listing all the available editors and their status. Select an editor from this list to navigate to that editor or click **Close** to collapse the side panel.

Button	Description
Previous	Navigates the user to the previous editor.
Next	Navigates the user to the next editor.

Editor Types

There are two types of editors available: List or Basic editors. When navigating to a Basic editor, the list of fields within the editor is displayed. List editors display a list of all records within that editor. Clicking an existing record or the **New** button opens the detail view for an individual record.

Editor Lock Out and Release Logic

Only one user at a time can actively work on an editor. A person with a padlock icon ( ) displays in the Editors side panel, Editor Home, and List Screen of list editors indicating which editors currently have users working on them. Hovering over the icon displays the name of the user who has checked out the editor, including the current user (you).

Editors that are currently being edited are read-only for all other users. The name of the person working on the editor displays in the header.

To release an editor, the user must:

- navigate to the next editor by clicking **Save and Next** or the **Editors** button and selecting the next editor from the side panel.
- click the **Cancel** button to return to the Editor Home screen.
- log out of the Campus application.
- navigate to a different tool in the Campus application.

Editors are automatically released when the in-application timeout limit has been exceeded. This is a back-end process and is usually around 30-60 minutes.

Text Editors

Images should not be inserted into text fields.

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Editors

Plan Header | Enrollment Information | Student Information | Parent/Guardian Information | Meeting Participants | Data Considerations | Other Factors to Consider | Post-High School Goals | Course of Study | Activities and Services to Reach Goal | Interagency Supports | Educational Representative After Attainment Age 18 | Team, Parent and Student Certification | Unique Needs/Present Levels/Annual Goals and Benchmarks | Specially Designed Instruction | Supplementary Aids and Services | Transportation | Participation in Statewide Assessments | Discipline | Participation in

Plan Header

The Plan Header editor stores plan information as well as related dates.

> This editor must be saved before entering data into other editors.

Plan Header	IN PROGRESS	Editor 1 of 28

Plan Type *
Annual IEP/Reevaluation Eligibility Deter... ▾

Meeting Date ⓘ
04/15/2024

IEP Initiation Date *
05/06/2024

IEP End Date
05/05/2025

Most recent ESR Date

Temporary Placement

Temporary Placement Date
month/day/year

Agency Representative

*Within 60 days, an IEP meeting must be held

Plan Header Editor

▸ Click here to expand...

Field	Description	Validation

Field	Description	Validation
Plan Type *Required*	The type of plan. Options include: • Annual IEP • Annual IEP/Reevaluation Eligibility Determination • IEP Meeting • IEP Revision • IEP Revision/Reevaluation Eligibility Determination • Initial Eligibility Determination • Initial IEP • Initial IEP/Initial Eligibility Determination • PPPS Meeting • Reevaluation Eligibility Determination	N/A
Meeting Date *Read-only*	The day the student's team met.	This field is populated from the Meeting Invitation document selected on the Meeting Participants editor.
IEP Initiation Date *Required*	The first day of the student's plan.	N/A
IEP End Date	The last day of the student's plan.	N/A
Most Recent ESR Date *Read-only*	The date of the student's most recent Evaluation.	This field pulls in the date from the most recent, locked Evaluation when it exists.
Temporary Placement		
Temporary Placement Date	The date of the temporary placement.	N/A
Agency Representative	The name of the agency representative in charge of the placement.	This field is limited to 150 characters.

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Enrollment Information

The Enrollment Information editor is a read-only editor that pulls in district and school information where the student is enrolled. This editor also documents the student's disability(ies).

Enrollment Information Editor

▸ Click here to expand...

Field	Description	Validation
Primary Disability *Required*	The student's first disability. Options include: • 1000 Autism • 1100 Deaf-Blind • 1400 Developmental Delay • 0200 Emotional Disability • 0700 Hearing Impairment • 0300 Learning Disability • 0100 Mild Intellectual Disability • 0400 Moderate Intellectual Disability • 0603 Orthopedic Impairment • 0601 Other Health Impairment • 0900 Partially Sighted • 1600 Pre-School Speech Delay • 0500 Severe Intellectual Disability • 1200 Speech and/or Language Impairment • 1300 Traumatic Brain Injury • 0800 Visually Impaired	N/A

Field	Description	Validation
Secondary Disability	The student's second disability, when applicable. The options available are the same as the Primary Disability options.	N/A
Tertiary Disability	The student's third disability, when applicable. The options available are the same as the Primary Disability options.	N/A
District of Residence	The student's district of residence.	This field pulls in from the student's Enrollment record when available but can be manually edited.
Attending Building	The building where the student attends school.	Upon Refresh, this field is pulled from the Enrollment tool and cannot be modified.
Grade	The student's grade.	Upon Refresh, this field is pulled from the Enrollment tool and cannot be modified. **Database Location:** enrollment.grade
District Information		
District Number	The district number associated with the Enrolled school.	District Information > State District Number
District Name	The district name associated with the Enrolled school.	District Information > Name
District Address	The district address associated with the Enrolled school.	District Information > Address
District Phone	The district phone number associated with the Enrolled school.	District Information > Phone
District SPED Address	The district special education address associated with the Enrolled school.	District Information > SPED Address
District SPED Phone	The district special ed phone number associated with the Enrolled school.	District Information > SPED Phone

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Student Information

The Student Information editor pulls demographic information regarding the student. This is a read-only editor.

> The **Refresh** button retrieves a fresh copy of data from the student's record.

Student Information Editor

▶ Click here to expand...

Field Name	Description	Database and UI Location (when Refreshed is clicked)
Last Name	The student's last name.	Demographics > Last Name identity.lastName
First Name	The student's first name.	Demographics > First Name identity.firstName
Middle Name	The student's middle name.	Demographics > Middle Name identity.middleName
Suffix	The student's suffix.	Demographics > Suffix Name identity.suffix
Birthdate	The student's birthdate.	Demographics > Birth Date identity.birthDate

Field Name	Description	Database and UI Location (when Refreshed is clicked)
Student ID	The student's ID number.	Enrollment > Student Number identity.studentNumber
Address	The student's address.	Households > Address Info address.number; address.street; address.tag; address.prefix; address.dir; address.apt; address.city; address.state; address.zip
Case Manager Information		
Name	The first and last name of the team member.	Student Information > Special Ed Team Members
Title	The role of the team member.	Student Information > Special Ed Team Members
Phone	The phone number of the team member.	Student Information > Special Ed Team Members

Parent/Guardian Information

The Parent/Guardian Information editor pulls the contact information of the student's parent/guardian(s).

The **Refresh** button retrieves a fresh copy of data from the parent/guardian's record.

Parent/Guardian Information Editor

▶ Click here to expand...

Field	Description
Print Sequence	The order in which the parent/guardian displays.
Name	The name of the parent/guardian.
Address	The address of the parent/guardian.
Home Phone	The parent/guardian's home phone.
Work Phone	The parent/guardian's work phone.
Cell Phone	The parent/guardian's cell phone.
Email	The parent/guardian's email.
Home Primary Language	The language the parent/guardian speaks at home.

Meeting Participants

The Meeting Participants editor records team meetings and participants for the student.

Meeting Participants Editor

▶ Click here to expand...

Field	Description	Validation
Print in Plan	Indicates this record prints.	This field defaults to unmarked.
Meeting Invite	The day of the meeting invitation.	This field populates from the locked Meeting Invitation document. Any locked Meeting Invitation types display in this dropdown.
Meeting Date *Read-only*	The day of the meeting.	This field populates from the selected Meeting Invitation document.
Invitation Date *Read-only*	The day of the invitation.	This field populates with the last Meeting Date from the selected Meeting Invitation document.
Meeting Location *Read-only*	The location of the meeting.	This field populates with the Meeting Location from the selected Meeting Invitation document.
Meeting Time *Read-only*	The time of the meeting.	This field populates with the Meeting Time from the selected Meeting Invitation document.

Field	Description	Validation
Meeting Purpose *Read-only*	The purpose of the meeting.	This field populates with the Purpose(s) from the selected Meeting Invitation document.
Attendance		
First Name	The first name of the team member.	This field populates from the Team Members on the selected Meeting Invitation.
Last Name	The last name of the team member.	This field populates from the Team Members on the selected Meeting Invitation.
Role Name	The role of the team member.	This field populates from the Team Members on the selected Meeting Invitation.

Data Considerations

The Data Considerations editor documents the student's strengths and data sources used to analyze the student's performance and the impact of the student's disability.

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Data Considerations Editor

▶ Click here to expand...

Field	Description	Validation
1. What are the student's strengths? *Required*	A description of the student's strengths.	N/A
What are the student's Employment Strengths? *Required*	A description of the student's employment strengths.	N/A
What are the student's Post-Secondary Education/Training Strengths? *Required*	A description of the student's secondary education/training strengths.	N/A

Field	Description	Validation
What are the student's Independent Living Strengths? *Required*	A description of the student's independent living strengths.	N/A
2. What are the educational concerns of the parent? *Required*	A description of the educational concerns of the parent.	
What are the educational concerns of the student, if appropriate?	A description of the educational concerns of the student.	N/A
3. What data sources and age appropriate transition assessments (including district or statewide assessments) are being used to create this IEP? *Required*	A description of the data sources included in creating the IEP.	N/A

What data sources and age appropriate transition assessments are being used to create this IEP?
The following columns display:
- Evaluation/Test Name
- Date Administered

Select an existing record or click New to open the side panel. The following fields display:

Date Administered *Required*	The day the data source was administered.	N/A
Data Source *Required*	Options include: • Survey/Questionnaires • Profiles/Portfolios • Vocational Assessment • Student Success Plan • Other	N/A

Field	Description	Validation
Specify Other *Required*	The other Data Source.	*This field is available and required with Other is selected above. This field is limited to 200 characters.
Evaluation Test Name	The name of the test.	This field is limited to 200 characters.
4. How does the child's disability affect the child's involvement and progress in the general education curriculum? *Required*	A description of how the student's disability impacts their progress in the general education curriculum.	N/A
5. What are the child's other educational needs that result from the child's disability? *Required*	A description of the student's educational needs based on their disability.	N/A
6. Will the student participate with non-disabled students in extracurricular and non-academic areas? *Required*	Indicates the student will participate with non-disabled peers in extracurricular and non-academic areas. Options are Yes or No.	N/A

Field	Description	Validation
If yes, identify supports and services on the "Needs, Services and Annual Goals" page *Required*	A description of the supports and services needed for the student to participate with non-disabled peers in extracurricular and non-academic areas.	*This field is available and required when Yes is selected from "Will the student participate with non-disabled students in extracurricular and non-academic areas?"

This field is required in order to Complete the editor. |
| **If no, explain why the student will not participate with non-disabled students in extracurricular and non-academic areas** *Required* | A description of why the student will not participate with non-disabled peers in extracurricular and non-academic areas. | *This field is available and required when No is selected from "Will the student participate with non-disabled students in extracurricular and non-academic areas?"

This field is required in order to Complete the editor. |
| **Braille?** | Indicates the student requires Braille instruction. | N/A |
| **If the IEP team has determined that Braille instruction is not appropriate at this time, provide a specific explanation of why such services are inappropriate** *Required* | A description as to why Braille instruction is not appropriate for the student. | *This field is required when No is selected for the Braille question. |

Other Factors to Consider

The Other Factors to Consider editor documents the areas the team considers when creating the student's plan.

Other Factors to Consider (NOT STARTED)	Editor 7 of 28

IEP Team must consider each of the factors.
If there is a need identified, select Yes and address in the IEP.

Communication needs of the student. *

Braille instruction for students who are blind or visually impaired. *

Communication and language needs for students who are deaf/hard of hearing. *

Language needs for students with limited English Proficiency. *

Positive behavior interventions, supports, and strategies for students whose behavior impedes learning. *

Need for assistive technology devices and services. *

Intervention supports and strategies for students who have difficulty accessing and/or using grade-level textbooks and other core materials in standard print formats. *

Evidence-based reading interventions, supports, and strategies for students with limited reading proficiency. *

Other Factors to Consider Editor

▶ Click here to expand...

Field	Description
Communication needs of the student	Options are Yes or No.
Braille instruction for students who are blind or visually impaired	Options are Yes or No.
Communication and language needs for students who are deaf/hard of hearing	Options are Yes or No.
Language needs for students with limited English proficiency	Options are Yes or No.
Positive behavior interventions, supports, and strategies for student whose behavior impedes learning	Options are Yes or No.
Need for assistive technology devices and services	Options are Yes or No.

Field	Description
Intervention supports and strategies for students who have difficulty accessing and/or using grade-level textbooks and other core materials in standard print formats	Options are Yes or No.
Evidence-based reading interventions, supports, and strategies for students with limited reading proficiency	Options are Yes or No.

Post-High School Goals

The Post-High School Goals editor documents the student's post-high school goals.

Post-High School Goals Editor

▶ Click here to expand...

Field	Description	Validation
Post School Employment Goal *Required*	A description of the student's post-school employment goal.	This field is limited to 8000 characters.
Post School Education/Training Goal *Required*	A description of the student's post-school education/training goal.	This field is limited to 8000 characters.

Field	Description	Validation
Post School Independent Living Goal	A description of the student's post-school independent living goal.	This field is limited to 8000 characters.
The student plans to exit school with	Options include: • Diploma • Diploma of Alternate Achievement Standards	N/A
Anticipated Date of Graduation *Required*	The student's anticipated graduation date.	N/A

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Course of Study

The Course of Study editor documents the student's anticipated and completed courses for each of their school years.

Course of Study List Screen

▶ Click here to expand...

Course of Study List Screen

Column Name	Description
Credits Earned Towards Graduation Lists the total credits the student has earned towards their graduation.	
Padlock Icon	Indicates the person currently editing the record.
Grade	The student's grade.
School Year	The school year.

Column Name	Description
Course of Study	The anticipated and completed course for that school year.

Course of Study Detail Screen

Select an existing record or click New to open the detail screen.

Course of Study Detail Screen

Field	Description
Grade	The student's grade level.
School Year	The school year.

The following columns display in the table:
- Duration
- Course
- Credits
- Course Status

Select the Add button to add a new course record in-line.

<div align="right">^ Back to Top</div>

Activities and Services to Reach Goal

The Activities and Services to Reach Goal editor documents the activity or service the student needs to achieve their goals.

> In order to place this editor in a Complete status, 4 records per goal area, 12 records total, must be saved.

Activities and Services to Reach Goal List Screen

▶ Click here to expand...

Activities and Services to Reach Goal

Column Name	Description
Padlock Icon	Indicates the person currently editing the record.
Goal Area	The area addressed by the activity/service.
Activity or Service Needed to Reach Goal	The name of the activity or service.
Responsible Party	The agency or person responsible for administering the activity or service.
Start Date	The first day of the activity or service.
Completion Date	The last day of the activity or service.

Activities and Services to Reach Goal

Select an existing record or click New to open the detail screen.

Activities and Services to Reach Goal Detail Screen

Field	Description	Validation
Goal Area *Required*	The area addressed by the goal. Options include: • Post School Employment • Post School Education/Training • Post School Independent Living	N/A
Goal *Read-Only*	The specific goal of the student.	This pulls in the goals entered on the Post-High School Goals editor. This field is truncated to the first 200 characters of the goal.
Activities/Services Needed to Reach Goal *Required*	The activity or service.	This field is limited to 8000 characters.
Responsible Party *Required*	The agency or person responsible for administering the activity or service.	This field is limited to 100 characters.
Start Date	The first day of the activity or service.	N/A
Completion Date	The last day of the activity or service.	N/A

Interagency Supports

The Interagency Supports editor documents the contacts for outside agencies responsible for administering support for the student.

Interagency Supports	IN PROGRESS	Editor 11 of 28
Agency		Release of Information ↑
Example Agency		

Interagency Supports List Screen

▶ Click here to expand...

Interagency Supports List Screen

Column Name	Description
Padlock Icon	Indicates the person currently editing the record.
Agency	The name of the agency.
Release of Information	Indicates there is an Interagency Release of Information Form on file with the school.

Interagency Supports Detail Screen

Select an existing record or click New to open the detail screen.

Interagency Supports

In addition to School Supports, the Student Will Need the Assistance of

Agency	Contact Person	Phone Number
Example Agency	Samantha Example	(___)___-___x_____

Is there a current Interagency Release of Information Form on file with the school? *
Yes

Interagency Supports Detail Screen

Field	Description	Validation

Field	Description	Validation
Agency	The name of the agency.	This field is limited to 200 characters.
Contact Person	The name of the agency contact.	This field is limited to 200 characters.
Phone Number	The agency contact's phone number.	N/A
Is there a current Interagency Release of Information Form on file with the school? *Required*	Indicates there is an Interagency Release of Information Form on file with the school. Options include: • Yes • No (if no, discuss form for transition planning with appropriate agencies) • Parent/Student chose to refuse services	N/A

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Educational Representative After Attainment Age 18

The Educational Representative After Attainment Age 18 editor documents the student's legal guardian, power-of-attorney, or voluntary grant of authority agent responsible for acting on their behalf in connection with rights under the Individuals with Disabilities Education Act (IDEA) and implementing the Delaware Department of Education regulations for them.

Educational Representative After Attainment of Age 18 Editor

▶ Click here to expand...

Field	Description	Validation
Date Discussed *Required*	The day the staff member discussed the form and process with the student prior to this meeting.	N/A
Staff member who initiated discussion *Required*	The staff member who discussed the form and process with the student prior to this meeting.	This field is limited to 100 characters.

Field	Description	Validation
I. Does the student have a court appointed legal guardian, or has the student designated someone through a Power of Attorney (POA) or Voluntary Grant of Authority (VGA) to act on their behalf in connection with rights under the Individuals with Disabilities Education Act ("IDEA"), Chapter 31 of Title 14 of the Delaware Code, and implementing Delaware Department of Education regulations? *Required*	Indicates the student has a legal guardian or designated person to act on their behalf. Options are Yes or No.	When Yes is selected, the rest of this editor becomes unavailable except the Name of Guardian/POA Agent/ VGA Agent field.
Name of Guardian/POA Agent/VGTA Agent **Required*	The name of the student's legal guardian, power-of-attorney, or voluntary grant of authority agent.	This field is available and required when Yes is selected for question I.
II. **Is the student able to provide informed consent in connection to the student's educational decision-making, meaning all four of the following necessary conditions are present** *Required*	Indicates the student can provide informed consent on their own behalf. Options are Yes or No.	N/A
Is the student generally able to understand the basic components of the student's IEP? *Required*	Options are Yes or No.	N/A
The student can use the information provided to make a decision.	Options are Yes or No.	N/A
The student understands that the student can say yes or no	Options are Yes or No.	N/A

Field	Description	Validation
Is the student able to provide informed consent?	Options are Yes or No.	N/A
III. Briefly describe the team's discussion of the determination. Include the data sources (e.g., student and staff interviews, classroom observations, district and statewide assessments, etc.) being reviewed to assist the discussion *Required*	A description of the team's discussion.	This field is limited to 8000 characters.
IV. If the student is presently able to provide informed consent, is there a parent or other individual(s) who have knowledge or special expertise, who the student would like to invite to future IEP meetings? *Required*	Indicates the student has someone they would like to invite to future IEP meetings. Options are Yes or No.	
Specify name of individual ***Required***	The name of the person to invite to future IEP meetings.	*This field is available and required when Yes is selected for question IV. This field is limited to 100 characters.

Field	Description	Validation
V. If the student is not able to provide informed consent, is there a willing and available parent, or other adult relative, who can serve as Educational Representative, to represent the educational interests of the student throughout the student's eligibility under the Individuals with Disabilities Education Act	Indicates the student has a parent or adult relative who can serve as their Educational Representative. Options include: • Yes • No, the district, charter or public agency will notify the Department of Education of student need for an Educational Representative. The Department of Education will appoint an individual through the Educational Surrogate Parent program.	Only one option can be selected.
Specify name of individual	The name of the student's parent or other adult relative serving as their Educational Representative.	*This field is available and required when Yes is selected for question V. This field is limited to 100 characters.
Date of Certification *Required*	The day the parent/guardian/surrogate agrees to act on the student's behalf.	The name of the parent/guardian/surrogate pulls in from the Parent/Guardian Information editor as read-only in the information text above the date field.

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Team, Parent and Student Certification

The Team, Parent, and Student Certification editor documents the team's, parent/guardian's, and student's agreement or disagreement with the determination documented in this plan.

Team, Parent, and Student Certification Editor

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Unique Needs/Present Levels/Annual Goals and Benchmarks

The Unique Needs/Present Levels/Annual Goals and Benchmarks editor includes the student's present levels of academic achievement and functional performance, including the assessment conducted to determine the level, resulting skills determined, and needs identified. This also includes goals and benchmarks.

Unique Needs/Present Levels/Annual Goals and Benchmarks List Screen

▶ Click here to expand...

Unique Needs/Present Levels/Annual Goals and Benchmarks List Screen

Column Name	Description
Padlock Icon	Indicates the person editing the record.

Column Name	Description
Sequence	The order of the record.
Area of Unique Need	The area where the student requires special education services, supplementary aids and supports, and program modification or supports.
Statement of Unique Need	The type of special education service, supplementary aids and support, and program modification or support.

Unique Needs/Present Levels/Annual Goals and Benchmarks Detail Screen

Select an existing record or click **New** to view the detail screen.

Unique Needs/Present Levels/Annual Goals and Benchmarks Detail Screen

Field	Description	Validation
Sequence Number *Required*	The order of the record.	This field automatically sequences for each new entry. Each sequence number must be unique.

Field	Description	Validation
Area of Unique Need *Required*	The area where the student requires special education services, supplementary aids and supports, and program modification or supports.	This field is limited to 100 characters.
Statement of unique need *Required*	The type of special education service, supplementary aids and support, and program modification or support.	This field is limited to 8000 characters.
Describe accommodations and/or modifications the student needs to benefit from his/her special education program *Required*	A description of the accommodation or modification.	This field is limited to 8000 characters.
Describe Present Levels of Educational Performance for the area/unique need above *Required*	A description of the student's current level of educational performance.	This field is limited to 8000 characters.
Measurable Annual Goals and Benchmarks This side panel displays when selecting an existing record or clicking the **New** button.		
Area of Unique Need *Read-only*	Displays the values entered into the "Area of Unique Need" field.	N/A
Present levels of Educational Performance *Read-only*	Displays the values entered into the "Describe Present Levels of Educational Performance for the area/unique need above" field.	N/A
Annual Goal		
Sequence Number	The order of the record.	This field automatically sequences for each new entry. Each sequence number must be unique.
ESY	This indicates that this area is part of an extended school year program.	When marked, the goal pulls into the ESY editor as read-only.
Reading ESY	Indicates the ESY program is for reading.	N/A

Field	Description	Validation
Related Service Goal	This indicates that this area is part of a related service goal.	When marked, the Related Service editor is required and cannot be placed in a Not Needed status.
Annual Goal *Required*	A description of the goal.	This field is limited to 8000 characters.
Benchmarks		
Sequence Number *Required*	The order of the record.	N/A
Benchmark *Required*	The standard the student must achieve to make progress toward the annual goal.	This field is limited to 2000 characters.
Marking Period	The terms associated with the enrollment for the active IEP.	This pulls from Calendar Setup.

Progress

The following fields display as read-only when a Progress Report document is created for this student's goals.

- Progress
- Date Progress Reported
- Optional Narrative

Specially Designed Instruction

The Specially Designed Instruction editor lists services for the student in a Special Education setting.

Specially Designed Instruction List Screen

▶ Click here to expand...

Specially Designed Instruction List Screen

Column Name	Description
Padlock Icon	Indicates the person editing the record.
Sequence	The order of the record.
Specially Designed Instruction	The service provided to the student.
Frequency/Duration	The amount of time the student requires the service.
Setting	The location of service.
Related Service	Indicates this is a related service.
Initiation Date	The first day of service.
End Date	The last day of service.

Specially Designed Instruction Detail Screen

Select an existing record or click **New** to view the detail screen.

Specially Designed Instruction Detail Screen

Field	Description	Validation
Sequence Number *Required*	The order of the record.	This field automatically sequences for each new entry. Each sequence number must be unique.
Addresses Area(s) of Unique Need *Required*	The area where the student requires special education services, supplementary aids and supports, and program modification or supports.	This field populates with the Areas of Unique Need from the Unique Needs/Present Levels/Annual Goals and Benchmarks editor.
Addresses Goal(s)	A description of the goal.	This field populates with the Areas of Unique Need from the Unique Needs/Present Levels/Annual Goals and Benchmarks editor.
Related Service *Checkbox*	Indicates this is a related service.	N/A

Field	Description	Validation
Related Service *Required, Dropdown*	The specific related service provided to the student. Options include: • Audiological Services • Counseling Services • Interpreting Services • Orientation and Mobility Services • Occupational Therapy • Parent Counseling and Training • Psychological Services • Physical Therapy • Rehabilitation Counseling Services • Recreational Services • Speech/Language Pathology Services • School Nurse Services • Social Work Services • Transportation • Visual Impairment Services	*This field is available and required when the Related Service checkbox is marked.
Specially Designed Instruction *Required*	The service provided to the student. Options include: • SDI for reading • SDI for math • SDI for writing • SDI for behavior • SDI for social/emotional skills • SDI for executive functioning • SDI for speech and/or language • SDI for occupational therapy • SDI for other	N/A
Specify Other *Required*	A description of the other service provided to the student.	*This field is available and required when SDI for other is selected as the Specially Designed Instruction. This field is limited to 150 characters.
Setting *Required*	The location of service. Options are: • General Education Setting • Special Education Setting	N/A
Accommodations	Any accommodations related to the service.	N/A

Field	Description	Validation
Describe...	A description of how the specially designed instruction addresses the student's needs by adapting their instruction.	This field is limited to 8000 characters.
Duration and Frequency		
Initiation Date *Required*	The first day of service.	This field populates with the Initiation Date from the Plan Header but can be modified as needed.
End Date *Required*	The last day of service.	This field populates with the End Date from the Plan Header but can be modified as needed.
Amount of time (in minutes) *Required*	The number of minutes the student receives the service.	N/A
Number times per *Required*	The number of times the student receives the service.	N/A
Frequency *Required*	The frequency of service. Options include: • Class period per month • Class periods per school day • Class periods per school week • Days per month • Days per school week • Sessions per month • Sessions per school day • Sessions per school week • Times per marking period • Times per month • Times per school day • Times per school week	N/A
Responsible Party *Required*	The person responsible for administering the service. Options include: • Special education staff • Regular education staff • Regular and special education staff	N/A

Supplementary Aids and Services

The Supplementary Aids and Services editor lists the accommodations and modifications made to assist the student in participating in regular education.

Supplementary Aids and Services List Screen

▸ Click here to expand...

Supplementary Aids and Services List Screen

Column Name	Description
Padlock Icon	Indicates the person editing the record.
Sequence	The order of the record.
Service	The service provided to the student.
Frequency/Duration	The amount of time the student receives services.
Setting	The location of service.
Initiation Date	The first day of service.
End Date	The last day of service.

Supplementary Aids and Services Detail Screen

Select an existing record or click **New** to view the detail screen.

Supplementary Aids and Services Detail Screen

Field	Description	Validation
Sequence Number *Required*	The order of the record.	This field automatically sequences for each new entry. Each sequence number must be unique.
Addresses Area(s) of Unique Need *Required*	The area where the student requires special education services, supplementary aids and supports, and program modification or supports.	This field populates with the Areas of Unique Need from the Unique Needs/Present Levels/Annual Goals and Benchmarks editor.
Addresses Goal(s)	A description of the goal.	This field populates with the Areas of Unique Need from the Unique Needs/Present Levels/Annual Goals and Benchmarks editor.
Service *Required*	The service provided to the student.	N/A
Setting *Required*	The location of service. Options are: • General Education Setting • Special Education Setting	N/A

Field	Description	Validation
Accommodations	Any accommodations for the service.	N/A
Describe...	A description of how the supplementary aids and services addresses the student's needs by adapting their instruction.	This field is limited to 8000 characters.
Duration and Frequency		
Initiation Date *Required*	The first day of service.	This field populates with the Initiation Date from the Plan Header but can be modified as needed.
End Date *Required*	The last day of service.	This field populates with the End Date from the Plan Header but can be modified as needed.
Amount of time (in minutes) *Required*	The number of minutes the student receives the service.	N/A
Number times per *Required*	The number of times the student receives the service.	N/A
Frequency *Required*	The frequency of service. Options include: • Class period per month • Class periods per school day • Class periods per school week • Days per month • Days per school week • Sessions per month • Sessions per school day • Sessions per school week • Times per marking period • Times per month • Times per school day • Times per school week	N/A

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Transportation

The Transportation editor is used to document the student's transportation needs.

Are there special transportation needs? *

No ▼

If yes, specify

Is it necessary to place this student, who is transported from the school bus into the charge of a parent or other authorized responsible person?

▼

Transportation Editor

▶ Click here to expand...

Field	Description	Validation
Are there special transportation needs? *Required*	Indicates the student requires additional transport services. Options are Yes or No.	N/A
If yes, specify **Required*	A description of the transportation service needs of the student.	*This field is available and required when Yes is selected for the Are there special transportation needs? question.
Is it necessary to place this student, who is transported from the school bus into the charge of a parent or other authorized responsible person?	Indicates the student must be placed in the care of a guardian or responsible person after transport. Options are Yes or No.	N/A

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Participation in Statewide Assessments

The Participation in Statewide Assessments editor documents how the student will participate in statewide assessments.

Participation in Statewide Assessments List Screen

▶ Click here to expand...

Participation in Statewide Assessments List Screen

Column Name	Description
Padlock Icon	Indicates the person currently editing the record.
School Year	The school year in which the assessment is taken.
Participation in Statewide Assessment	Indicates how the student participates in the statewide assessment.

Participation in Statewide Assessments Detail Screen

Select an existing record or click the **New** button to view the detail screen.

Participation in Statewide Assessment Detail Screen

Field	Description	Validation
School Year	The school year in which the assessment is taken.	N/A
Student is not in a grade that is assessed	Indicates the student is not in the grade assessed.	Only one of the four checkboxes can be selected.
Student will participate in general assessments without accommodations	Indicates the student will take the assessment without accommodations.	Only one of the four checkboxes can be selected.
Student will participate in general assessments with accommodations as documented on the attached Student Accommodation Form	Indicates the student requires accommodations to participate in the assessment.	Only one of the four checkboxes can be selected.
Student will participate in alternate assessments, The Decision-Making Tool and Student Accommodation Form are attached	Indicates the student requires an alternate assessment.	Only one of the four checkboxes can be selected.
Multilingual Learner		
As an identified multilingual learner, student will participate in the annual English learner proficiency assessment with accommodations	Indicates the student will participate in the annual English proficiency assessment with accommodations.	N/A
As an identified multilingual learner, student will participate in the annual English learner proficiency assessment without accommodations	Indicates the student will participate in the annual English proficiency assessment without accommodations.	N/A
As an identified multilingual learner, student will participate in the annual alternate English learner proficiency assessment	Indicates the student will participate in the annual alternate English proficiency assessment.	N/A

Discipline

The Discipline editor is used to note the student's adherence to the school's code of conduct.

Discipline Editor

▶ Click here to expand...

Field	Description	Validation
The student will adhere to School Code of Conduct	Options include: • Interventions and supports are described under services/supports and/or in goals • Behavior intervention and support plan (see attached) • Other	Mark all that apply.
Specify Other *Required*	A description of what other supports the student may need to follow the school code of conduct.	*This field is available and required when Other is selected above. This field is limited to 8000 characters.

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Participation in Twelve Month Program

The Participation in Twelve Month Program editor indicates the parent has chosen a twelve-month program for their student. Options are Yes, No, or Not Applicable.

Participation in Twelve Month Program Editor

Consideration of Reading-Based Extended School Year Services

The Consideration of Reading-Based Extended School Year Services editor documents the student's need for an ESY reading program.

Consideration of Reading-Based Extended School Year Services Editor

▶ Click here to expand...

Field	Description	Validation
Age 7 or above	Indicates the student is age 7 or older. Options are: • Student IS age 7 or above • Student IS NOT 7 or above	N/A

Field	Description	Validation
Is student demonstrating phonological awareness?	Indicates the student is demonstrating phonological awareness. Options are: • Student IS demonstrating phonological awareness and ability to use letter sound knowledge and decode unknown words • Student IS NOT demonstrating phonological awareness and ability to use letter sound knowledge and decode unknown words	N/A
Reading-Based ESY Eligibility Determination	Indicates the student's reading-based extended school year eligibility determination. Options are: • Eligible • Eligible, but declined by parent • Eligible, but declined by IEP team • Not eligible	N/A
If the student is eligible, but Reading Based ESY Services were declined by the IEP team, provide a specific explanation of why such services are inappropriate *Required*	A description of why these services are inappropriate for this student.	*This field is available and required when "Eligible, but declined by IEP team" is selected above. This field is limited to 8000 characters.
Specify Goals	The specific reading goals for the student.	*This field is available and required when Eligible is selected above. This field is limited to 8000 characters.

Reading-Based ESY Services

The Reading-Based ESY Services editor documents the services provided to the student in an Extended School Year program.

Reading-Based ESY Services List Screen

▶ Click here to expand...

Reading-Based ESY Services List Screen

Column Name	Description
Padlock Icon	Indicates the person editing the record.
Sequence	The order of the record.
Service	The service provided to the student.
Type	The type of service.
Frequency	The amount of time the student receives services.
Initiation Date	The first day of service.
End Date	The last day of service.

Reading-Based ESY Services Detail Screen

Select an existing record or click **New** to view the detail screen.

Reading-Based ESY Services Detail Screen

Field	Description	Validation
Sequence Number *Required*	The order of the record.	This field automatically sequences for each new entry. Each sequence number must be unique.
Service *Required*	The service provided to the student. The only option is Reading Instruction.	N/A
Service Type *Required*	The type of service. The only option is Reading-Based ESY.	N/A
Grade	The student's grade.	N/A
Setting *Required*	The location of service. Options are: • General Education Setting • Special Education Setting	N/A
Describe	A description of how the service addresses the student's needs by adapting their instruction.	This field is limited to 8000 characters.
Duration and Frequency		

Field	Description	Validation
Initiation Date *Required*	The first day of service.	This field populates with the Initiation Date from the Plan Header but can be modified as needed.
End Date *Required*	The last day of service.	This field populates with the End Date from the Plan Header but can be modified as needed.
Amount of time (in minutes) *Required*	The number of minutes the student receives the service.	N/A
Number times per *Required*	The number of times the student receives the service.	N/A
Frequency *Required*	The frequency of service. Options include: • Class period per month • Class periods per school day • Class periods per school week • Days per month • Days per school week • Sessions per month • Sessions per day • Sessions per week • Times per marking period	N/A

ESY

The Extended School Year editor indicates the student requires services beyond the standard school time, such as beyond school hours or during breaks.

Extended School Year Editor

▸ Click here to expand...

Field	Description	Validation
Is ESY needed? *Required*	Indicates ESY is needed. Options include: - Yes - No - ESY offered, but declined by parent	N/A
Rationale for Decision *Required*	A description of the decision rationale.	This field is limited to 8000 characters.
If yes, describe ESY goal(s) **Required*	A description of the ESY goals.	*This field is available and required when Yes is selected from the "Is ESY needed" dropdown. This field is limited to 8000 characters.
Specify Goals *Read-only*	A read-only view of the ESY Goal.	N/A

ESY Services

The Extended School Year Services editor documents the ESY services provided to the student.

ESY Services List Screen

▸ Click here to expand...

ESY Services List Screen

Column Name	Description
Padlock Icon	Indicates the person editing the record.
Sequence	The order of the record.
Service	The service provided to the student.
Type	The type of service.
Frequency	The amount of time the student requires the service.
Initiation Date	The first day of service.
End Date	The last day of service.

ESY Services Detail Screen

Select an existing record or click **New** to view the detail screen.

ESY Services Detail Screen

Field	Description	Validation
Sequence Number *Required*	The order of the record.	This field automatically sequences for each new entry. Each sequence number must be unique.

Field	Description	Validation
Service *Required*	The service provided to the student. • AUDESY: Audiology • COESY: Counseling Services • INSTMA: Instruction - Math • INSTREA: Instruction - Reading • INSESY: Instruction • INTESY: Interpreting Services • OTESY: Occupational Therapy • OMESY: Orientation and Mobility Services • PARCOESY: Parent Counseling and Training • PTESY: Physical Therapy • PSESY: Psychological Services • RECESY: Recreation • REHABESY: Rehabilitation Counseling Services • SNESY: School Nurse Services • SWESY: Social Work Services • STESY: Speech/Language Pathology Services • TRANSESY: Transportation	N/A
Service Type *Required*	The type of service. • AUDESY: Audiology • COESY: Counseling Services • INSTMA: Instruction - Math • INSTREA: Instruction - Reading • INSESY: Instruction • INTESY: Interpreting Services • OTESY: Occupational Therapy • OMESY: Orientation and Mobility Services • PARCOESY: Parent Counseling and Training • PTESY: Physical Therapy • PSESY: Psychological Services • RECESY: Recreation • REHABESY: Rehabilitation Counseling Services • SNESY: School Nurse Services • SWESY: Social Work Services • STESY: Speech/Language Pathology Services • TRANSESY: Transportation	N/A

Field	Description	Validation
Grade	The student's grade.	N/A
Setting *Required*	The location of service. Options are: • General Education Setting • Special Education Setting	N/A
Describe	A description of how the service addresses the student's needs by adapting their instruction.	This field is limited to 8000 characters.
Duration and Frequency		
Initiation Date *Required*	The first day of service.	This field populates with the Initiation Date from the Plan Header but can be modified as needed.
End Date *Required*	The last day of service.	This field populates with the End Date from the Plan Header but can be modified as needed.
Amount of time (in minutes) *Required*	The number of minutes the student receives the service.	N/A
Number times per *Required*	The number of times the student receives the service.	N/A
Frequency *Required*	The frequency of service. Options include: • Class period per month • Class periods per school day • Class periods per school week • Days per month • Days per school week • Sessions per month • Sessions per school day • Sessions per school week • Times per marking period • Times per month • Times per school day • Times per school week	N/A

Least Restrictive Environment/Placement

The Least Restrictive Environment/Placement editor documents where the student receives services.

Least Restrictive Environment/Placement List Screen

▶ Click here to expand...

Least Restrictive Environment/Placement List Screen

Field	Description
Padlock Icon	Indicates the person editing the record.
Least Restrictive Environment/Placement	The student's placement.
Initiation Date	The first day of the placement.
End Date	The last day of the placement.

Least Restrictive Environment/Placement Detail Screen

Select an existing record or click New to view the detail screen.

Least Restrictive Environment/Placement

A student with a disability shall not be removed from an education setting in age appropriate regular classes solely because of needed modifications in general education curriculum. Special classes, separate schooling, or other removal of children with disabilities from the regular educational environment occurs only if the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

Use the options below to determine the appropriate setting *

☐ **A. Regular Setting** includes pull-out related services and team classrooms. Student served inside the regular classroom greater than or equal to 80% of the day

☐ **B. Services Provided Both in Separate Education Classes and Regular Setting** Student served inside the regular classroom greater than or equal to 40% of the day and no more than 79% of the day

☐ **C. Separate Special Education in an Integrated Setting** Student served inside the regular classroom less than 40% of the day

☐ **D. Separate School** Student served in public or private separate day school facility for greater than 50% of the school day or a residential facility of student does not live at the facility

☐ **E. Residential Facility** where student resides during the school week

☐ **F. Homebound or Hospital**

☐ **G. Correctional Facilities** (only used by DSCYF and Prison Education) Students placed in a short-term detention or correctional facilities

An explanation must be provided about the extent, if any, to which the child will not participate with non-disabled children in the regular class *

[   ]

Building *

[   ]

Initiation Date *

[month/day/year   📅]

End Date *

Least Restrictive Environment/Placement Detail Screen

Field	Description	Validation

Field	Description	Validation
Use the options below to determine the appropriate setting *Required*	The student's setting. Click the expand link to view the values available. ▸ Click here to expand... Options include: • **A. Regular Setting** includes pull-out related services and team classrooms. Student served inside the regular classroom greater than or equal to 80% of the day • **B. Services Provided Both in Separate Education Classes and Regular Setting** Student served inside the regular classroom greater than or equal to 40% of the day and no more than 79% of the day • **C. Separate Special Education in an Integrated Setting** Student served inside the regular classroom less than 40% of the day • **D. Separate School** Student served in public or private separate day school facility for greater than 50% of the school day or a residential facility of student does not live at the facility • **E. Residential Facility** where student resides during the school week • **F. Homebound or Hospital** • **G. Correctional Facilities** (only used by DSCYF and Prison Education) Students placed in a short-term detention or correctional facilities	Only one option can be selected.
An explanation must be provided about the extent, if any, to which the child will not participate with non-disabled children in the regular class *Required*	A description of how the student will not participate with non-disabled peers in the regular classroom.	This field is limited to 8000 characters.
Building *Required*	The location of the placement.	This field is limited to 150 characters.

Field	Description	Validation
Initiation Date *Required*	The first day of the placement.	N/A
End Date *Required*	The last day of the placement.	N/A

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Signatures

The Signatures editor documents the parent/guardian(s)' or student's (if over 18) consent of the proposed plan documented in the rest of the IEP.

This editor is often filled out and electronically signed by the student's parent/guardian. In order to send the plan for eSignature, this editor must be placed in the status **Complete Pending eSignature** OR **Not Needed**. See the Delaware Plan eSignature Editors process article for additional information.

Signatures Editor

▶ Click here to expand...

Field	Description	Validation
I acknowledge that I have received a copy of the Procedural Safeguards. My due process rights under these Procedural Safeguards have been explained to me	Indicates the parent has received the Procedural Safeguards document. Options are Yes or No.	N/A
I agree with the program described in this document	Indicates the parent agrees with the proposed program for their student. Options are Yes or No.	N/A
I agree with the placement decision as noted above and discussed at this meeting	Indicates the parent agrees with the proposed placement for their student. Options are Yes or No.	N/A
At least one year before the age of majority (18), the student has been informed that rights will transfer to him/her unless a legal guardian has been appointed	Indicates the student has been informed that their rights will transfer to them unless a legal guardian is appointed. Options are Yes or Not Applicable.	N/A
If Parent Does Not Attend		
Name	The name of the case manager.	This field populates with the Case Manager name from the Team Members tool.
Position	The role of the case manager	This field populates with the Case Manager role from the Team Members tool.
Method of Contact	The form of communicating with the parent. Options include: • In Person • Via Email • Via Mail • Via Phone • Other	N/A

Field	Description	Validation
Specify Other *Required*	The other form of communication.	*This field is available and required when Other is selected as the Method of Contact.

Medicaid

The Medicaid Consent editor documents the parent/guardian's consent for the district to disclose the student's information regarding seeking Medicaid funding.

This editor is often filled out and electronically signed by the student's parent/guardian. In order to send the plan for eSignature, this editor must be placed in the status **Complete Pending eSignature** OR **Not Needed**. See the Delaware Plan eSignature Editors process article for additional information.

Medicaid (NOT STARTED)   Editor 27 of 28

I hereby authorize this school MOT Charter to release this student's records and information to Medicaid for the purpose of billing for special education and related services that may be provided to this student under 34 CFR part 300.

By checking YES and signing this authorization document, I understand and agree that

- My signature on this form permits the above-mentioned school and/or school district/charter school to use this student's and/or my public benefits or insurance information to pay for services under 34 CFR part 300, which outlines special education and related services under the Individuals With Disabilities Education Act
- My signature is voluntary and services are not dependent on my authorization
- My signature is valid until such a time that it is revoked
- I can revoke my approval at any time by writing to the originating agency, which revocation will be valid upon receipt, but which will not affect actions taken prior to receipt of such revocation
- I have a right to request and receive from the school district or charter school a copy of the records that have been given to Medicaid
- I have a right to receive a copy of this consent form
- Requesting the use of these funds DOES NOT affect this student's rights/your rights to a fair, appropriate public education nor does it cost you or your family money. There will be no co-pays, no loss of Medicaid eligibility and no impact on lifetime Medicaid benefits as a result of this consent

By checking NO and signing this document, I am refusing the use of these funds

- I understand that I have the right to refuse the permission to use these funds to pay for services under 34 CFR part 300, which are special education and related services under the Individuals with Disabilities Education Act

YES, I give the school permission to share this student's education and health-related information with Medicaid, including billing information
☐

NO, I do not give the school permission to share this student's education and health-related information with Medicaid
☐

Signed by
check only one

☐ Student (if over 18 years of age)
☐ Parent
☐ Guardian
☐ Custodian

Medicaid Editor

▶ Click here to expand...

Field	Description	Validation
YES, I give the school permission to share this student's education and health-related information with Medicaid, including billing information	Indicates the person gives permission to the school to share the student's information with Medicaid.	N/A
NO, I do not give the school permission to share this student's education and health-related information with Medicaid	Indicates the person does NOT give permission to the school to share the student's information with Medicaid.	N/A
Signed by	The person signing the Medicaid consent. Options include: • Student (if over 18 years of age) • Parent • Guardian • Custodian	Only one option can be selected.

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Prior Written Notice

The Prior Written Notice editor documents the proposed or refused actions considered by the IEP team and the notice dates provided to the parent/guardian(s).

This editor is often filled out and electronically signed by the student's parent/guardian. In order to send the plan for eSignature, this editor must be placed in the status **Complete Pending eSignature** OR **Not Needed**. See the Delaware Plan eSignature Editors Process process article for additional information.

Prior Written Notice List Screen
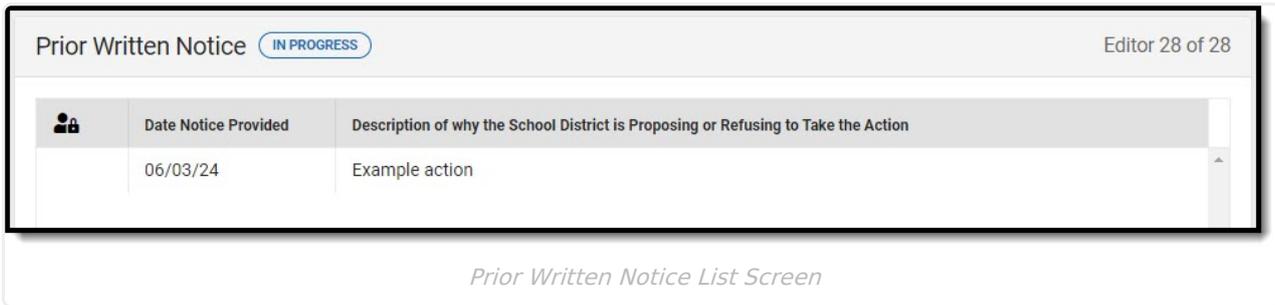
▶ Click here to expand...

Prior Written Notice List Screen

Column Name	Description
Padlock Icon	Indicates the person editing the record.
Date Notice Provided	The date of the notice.
Description of why the School District is Proposing or Refusing to Take the Action	Displays the first 100 characters of the description from the detail screen.

Prior Written Notice Detail Screen

Select an existing record or click **New** to view the detail screen.

Prior Written Notice Detail Screen

Field	Description	Validation
Print Student PWN	Indicates the Prior Written Notice prints.	N/A
1. Description of the Action the School District Proposes or Refuses to Take *Required*	A description of the proposed action.	This field is limited to 8000 characters.
2. Explanation of Why the School District is Proposing or Refusing to Take the Action *Required*	An explanation of why the school is proposing or refusing to take action.	This field is limited to 8000 characters.

Field	Description	Validation
3. Description of Each Evaluation Procedure, Assessment, Record, or Report the School District Used in Deciding to Propose or Refuse the Action *Required*	A description of the evidence used to decide to propose or refuse action.	This field is limited to 8000 characters.
4. Description of Any Other Choices the IEP Team Considered and the Reasons Why Those Choices Were Rejected *Required*	A description of the choices considered and rejected by the IEP team.	This field is limited to 8000 characters.
5. Description of Other Reasons Why the School District Proposed or Refused the Action *Required*	Any other reasons why the school proposed or refused action.	This field is limited to 8000 characters.
This Notice is provided to you on *Required*	The date on which the notice was provided.	N/A
I waive the waiting period of 10 school days before implementation of the proposed action described in section 1 and agree that the proposed action described in section 1 can be implemented as soon as possible.	Indicates the person waives the waiting period before the implementation of the proposed action.	N/A